

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90310 015 \*\*\*150.00

<b>DOCUMENT # P03000080410</b> 1. Entity Name <b>DTECH HOLDINGS, INC.</b>					
Principal Place of Business <b>1407 NW 84TH AVE MIAMI, FL 33126</b>			Mailing Address <b>1407 NW 84TH AVE MIAMI, FL 33126</b>		
2. Principal Place of Business <b>1401 NW 88 AVE</b>		3. Mailing Address <b>1401 NW 88 AVE</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>MIAMI FL</b>		City & State <b>MIAMI FL</b>		4. FEI Number <b>20-0108124</b>	
Zip <b>33172</b>		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SHOMAR, JOSEPH 7777 NW 146TH ST MIAMI LAKES, FL 33016</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE: <u><i>Joseph Shomar</i></u> <span style="float: right;"><u>04/14/05</u></span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DPS ABBOUD, GHASSAN 1407 NW 84TH AVE MIAMI, FL 33126</b>	<div style="text-align: right;"><input type="checkbox"/> Delete</div> <div style="padding: 5px;"> <b>DPS ABBOUD GHASSAN 1401 NW 88 AVE MIAMI FL 33172</b> </div> <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DVT ABBOUD, ROGER 1407 NW 84TH AVE MIAMI, FL 33126</b>	<div style="text-align: right;"><input type="checkbox"/> Delete</div> <div style="padding: 5px;"> <b>DVT ABBOUD ROGER 1401 NW 88 AVE MIAMI FL 33172</b> </div> <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Ghassan Abboud</i></u> <span style="float: right;"><b>GHASSAN ABBDOUD 04/14/05 3054717755</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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04142005 Chg-P CR2E034 (10/03)